

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SES</i>	<i>697801</i>	<i>2/1</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	<i>59523</i>		<i>3-21-00</i>

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Best Available

Claim	Date
Final Original	
1	<i>2/1/00</i>
2	<i>2/1/00</i>
3	<i>2/1/00</i>
4	<i>2/1/00</i>
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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